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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/656,084		
	Filing Date	September 6, 2000	
	First Named Inventor	Barry N. KREISWIRTH et al.	
	Art Unit	1631	
	Examiner Name	Cheyne D. Ly	
Total Number of Pages in This Submission	30	Attorney Docket Number	19124.0002

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO-1449 and Four (4) References
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Swidler Berlin LLP		
Signature			
Printed Name	Robert R. Seabold		
Date	January 12, 2006	Reg. No.	41,298

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
for FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	09/656,084
Filing Date	September 6, 2000
First Named Inventor	Barry N. KREISWIRTH et al.
Examiner Name	Cheyne D. Ly
Art Unit	1631
Attorney Docket No.	19124.0002

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____☒ Deposit Account Deposit Account Number: 19-5127 Deposit Account Name: Swidler Berlin LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Total Claims**Extra Claims****Fee (\$)****Fee Paid (\$)**

_____ -20 or HP= _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims**Extra Claims****Fee (\$)****Fee Paid (\$)**

_____ - 3 or HP= 0 x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims**Fee (\$)****Fee Paid (\$)****3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ / 50 = _____ (round up to a whole number) x	_____	_____

4. OTHER FEE(S)

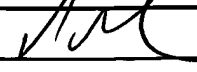
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Information Disclosure Statement Fee

Fees Paid (\$)

180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	41,298	Telephone	202-424-7500
Name (Print/Type)	Robert R. Seabold	Date	January 12, 2006		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Barry N. KREISWIRTH et al.

Application No. 09/656,084

Filed: September 6, 2000

For: SYSTEM AND METHOD FOR TRACKING AND CONTROLLING INFECTIONS

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Art Unit: 1631

Examiner: Cheyne D. Ly

INFORMATION DISCLOSURE STATEMENT

Box IDS
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

For insuring compliance with the Applicant's duty of disclosure under 37 CFR § 1.56, the undersigned hereby submits four (4) references listed on the attached Form PTO-1449 in chronological order for consideration by the Examiner in charge of the above-identified patent application.

These references are being submitted following receipt of a Final Office Action but prior to payment of the Issue Fee. No item of information contained herein was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the undersigned, no item of information contained herein was known to any individual designated in 37 CFR § 1.56 more than three months prior to the filing of this information disclosure statement.

It is respectfully requested that these references be made of record in this application by the Examiner's completion and return of the attached Form PTO-1449.

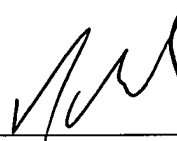
01/13/2006 HHL111 00000105 195127 09656084
01 FC:1806 180.00 DA

The Commissioner is hereby authorized to charge Deposit Account 19-5127, in the amount of \$180.00 for payment of the fee set forth in 37 CFR § 1.17(p).

The Commissioner is hereby authorized to charge payment of any deficiency in the above fee(s) or to charge any additional fees required under 37 CFR § 1.16 or 1.17 or credit any overpayment to Deposit Account No. 19-5127.

Respectfully submitted,

Date: January 12, 2006



Robert R. Seabold, Reg. No. 41,298
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3000 K Street, N.W., Suite 300
Washington, D.C. 20007-5116
Telephone: 202 424-7500
Facsimile: 202 295-8478



FORM PTO-1449 INFORMATION DISCLOSURE CITATION	Attorney Docket: 19124.0002 Applicants: Barry N. KREISWIRTH et al. Filing Date: September 6, 2000	Application No.: 09/656,084 Examiner: Cheyne D. Ly Group Art Unit: 1631
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U.S. PATENT DOCUMENTS						
EXAMINER INITIAL	REF. NO.	DOCUMENT NUMBER	DATE	NAME	CLASS	SUB-CLASS
	AA					
	AB					
	AC					
	AD					
	AE					
	AF					

FOREIGN PATENT DOCUMENTS							
	REF. NO.	DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUB-CLASS	TRANSLATION
	CA						
	CB						
	CC						
	CD						
	CE						
	CF						
	CG						
	CH						
	CI						
	CJ						

OTHER REFERENCES		
	REF. NO.	AUTHOR, TITLE, DATE, PERTINENT PAGES, ETC.
	CK	Richard Frothingham, <i>Journal of Clinical Microbiology</i> , Differentiation of Strains in Mycobacterium tuberculosis Complex by DNA Sequence Polymorphisms, Including Rapid Identification of M. bovis BCB, Apr. 1995, pp. 840-844
	CL	Richard Frothingham, et al., <i>Microbiology</i> , Genetic diversity in the Mycobacterium tuberculosis complex based on variable numbers of tandem DNA repeats, 1998, 144, pp. 1189-1196
	CM	Kathryn E. Stockbauer et al., <i>Proc. Natl. Acad. Sci. USA</i> , Hypervariability generated by natural selection in an extracellular complement-inhibiting protein of serotype M1 strains of group A. Streptococcus, March 1998, Vol. 95, pp. 3128-3133
	CN	Nancy P. Hoe, et al., <i>Nature Medicine</i> , Rapid selection of complement-inhibiting protein variants in group A Streptococcus epidemic waves, August 1999, Vol. 5, No. 8, pp. 924-929
	CO	
	CP	
	CQ	
	CR	
	CS	
	CT	
	CU	
	CV	
	CW	

Examiner	Date Considered
Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Application	